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ABSTRACT

The paper examines issues, philosophy and guidelines for psychological assessment of the disabled. Focused on are: (1) adjustments in testing procedures and (2) applicability of standard norms with commonly used psychological test instruments for the assessment of ability, interest, and personality. The importance of accurate assessment for appropriate rehabilitation program development is stressed. Considered as inappropriate are the approach which rejects all standardized testing procedures and norms as unfair as well as the approach which applies standard instruments with no modifications. A functional approach is recommended which emphasizes standardization, normative validity and reliability considerations placed in the context of the whole person including a careful interview covering personal, social, and vocational history. Problems with using the General Aptitude Test Battery are specifically identified and the lack of standardization data for the disabled on many other tests is noted. (DB)

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PSYCHOLOGICAL ASSESSMENT OF THE DISABLED

Psychological assessment of the disabled is a complex and complicated issue. Since, in the time allowed, I cannot cover special tests or specific objectives of commonly used test, I have decided to settle for major issues, philosophy and guidelines for testing the handicapped. Specifically, I will focus on the issues of 1) adjustment in testing procedures and 2) applicability of standard norms with commonly used psychological test instruments for the assessment of ability, interest, and personality.

I recently discussed the assessment of the disabled with the head of an evaluation unit. Each week he evaluates about ten individuals with various kinds of handicaps. I wanted to know what a professional who provides this kind of service, day in and day out, to hundreds of clients a year, would have to say about this issue. Basically, his response was that handicapped individuals have to compete against non-handicapped people in the job market and that it's realistic to use standard norms. However, he indicated that he may adjust the way tests are

administered, depending upon the individuals' handicap. For example, when giving the General Aptitude Test Battery (GATB) to a client who has weak hand strength and dexterity, he sees the results as reflecting those characteristics rather than the clients' ability and thus he seeks to find a test where speed does not penalize his client. He is conscientious in trying to be fair to the clients he evaluates. I think most psychologists, who assess the disabled, want to be fair and do a good job. However, good intentions do not make up for lack of knowledge of the issues involved in assessing the disabled. It is really more involved than making a few adjustments in the way tests are administered and then using standard norms.

This is an important issue because psychological assessment is a routine aspect of the assessment of handicapped individuals in treatment facilities. It involves a large variety and several types of psychological instruments. These range from projective and objective tests of personality, to intellectual evaluation and vocationally oriented measures of ability, aptitude and

interest. The test results may be used to assess important issues concerning the rehabilitation program for the individual. For example, 1) motivational issues, 2) potential for successful outcome, 3) planning for counseling to help increase self-awareness so that the handicapped person can make realistic life choices, and 4) providing the data necessary to help the handicapped person move into existing or modified work environments.

Standardized psychological testing procedures and norms have been challenged as unfair and inappropriate for handicapped individuals. Various approaches have been taken in the effort to make testing more fair. One extreme has been to rule out most typical tests as inappropriate while another approach has been to mindlessly apply clinical instruments with no change in procedures, time limits, etc. In contrast, I will later discuss a functional approach, which emphasizes standardization, normative validity and reliability considerations placed in the context of purpose.

Warren Willingham, in his paper on the validity of testing handicapped people, points out that visual, hearing, language, and dexterity types of handicap are quite different with respect to the implications for testing and that it would be a serious error to think of handicapped people as one sub-group of clients. A knowledgeable, flexible examiner realizes that he has to accommodate to the particular disability of the individual with whom he is working. This may mean special testing arrangements. With the visually impaired, for example, it may mean having tests in large type, braille or on audio cassette. A reader may be necessary. Time for the testing may need to be extended. With the hearing impaired it may mean using a trained interpreter. The purpose is to provide a test experience that is as equivalent as possible to that taken by non-handicapped individuals.

For the rehabilitation psychologist, the validity of a test battery to predict his/her client's performance in future settings is of primary importance. A few years ago, while working in the physical medicine department of Parkland Hospital in Dallas, we had a client who was Hispanic, a right leg amputee

below the knee, and an experienced cook in Mexican restaurants. He scored a Wechsler verbal I.Q. of 56 as part of the testing procedure. It was clear that in addition to his physical handicap, there was a cultural difference that needed to be taken into account. However, in the case conference discussion, the I.Q. score side tracked some members of the planning committee, concerned that anyone who scored at a mental retarded level would be unable to function independently within a restaurant kitchen even when the physical disability could be largely eliminated through a prothesis and training. Fortunately, by taking a broader view of his background, experience, and other test results, the planning was realistic and he was successful in returning to work as a cook. It clearly would have been unfair to this client to interpreted his performance on the verbal WAIS as a valid indicator of how well he could function in another language in a social context appropriate for him.

Cautilli and Bouman have suggested adjustments in testing procedures that can be useful in providing a fair assessment with

visually impaired clients. Make sure that you tell your client all the pertinent information that a seeing person would naturally obtain by sight in this situation. Questionnaire tests are easily adapted by reading them to a visually handicapped client, or through the use of a tape recording. Reading the possible answers at least twice, provides improved accuracy. But there is a problem of privacy. Sighted persons have privacy when they read for themselves and record their decisions on an answer sheet. One way suggested to overcome this is to have clients record their answers by typing or braille. Another procedure for giving a personality test like the MMPI is to have clients place tickets into two piles, one for true and another for false.

We know that when we make adjustments in the standard procedures for administering tests for our handicapped clients, that the interpretation of the test results, based on norms developed for non-handicapped groups, can be used only with great caution. When we make changes the material itself may be changed or may not be used in a standard way. As Cautilli and Bouman

have pointed out, in many cases the purity of what the test is supposed to measure is greatly distorted. We have little data to go on.

An example of this lack of data is seen in a current controversy brewing over the use of the General Aptitude Test Battery by the Department of Labor. On December, 1986, the Chair of the APA Committee on Disabilities and Handicaps in a letter to Secretary of Labor raised issues and concerns regarding the use of the GATB for people with disabilities.

Of special concern is the plan to use validity generalization as the basis for expanding the use of the GATB to all candidates for every job in the DOT without conducting predictive validity studies of the GATB for persons with handicapping conditions.

The conclusion was "the use of the GATB as a primary predictor of worker ability unjustifiably discriminates against persons with diverse types of disabilities who could otherwise do a job with reasonable accommodations".

Essentially the response of the Secretary of Labor was that "test scores should be considered minimal estimates of ability for persons with disabilities". He further states that often they will require individualized assistance in obtaining employment.

The manager of test research field center with a Department of Labor grant to provide validity generalization research also responded. Among other issues he addressed, he stated that the Department of Labor uses in addition to test results: 1) job interests, 2) experience, 3) skills, 4) education, and 5) other factors specified by employers in order to accommodate the special needs of individuals with disabilities.

In addition, he lists a number of special instruments and procedures to assist those with special testing needs. He agrees that "overall, there is little direct empirical validity evidence for persons with disabilities" and that "test scores should be used as an aid to placing those with disabilities into appropriate jobs, rather than as an artificial barrier to employment opportunities".

This controversy highlights the lack of clear guidelines for the rehabilitation psychologist. If you think the issues are confusing when using the GATB, consider the lack of data concerning the WAIS, SCII, MMPI, and other standard psychological instruments used with disabled clients to assess ability, interest and personality.

The best way to meet the constantly recurring problem of adequate norms for handicapped people is by experience on the part of the psychologist. The following quote from Cautilli and Bouman expresses this very well:

> "The psychologist must make a judgment with regard to how, and how much, test materials and the testing procedure should be changed, and how and to what extent the blind (handicapped) client differs from the normative group, and put all these immeasurable factors together into a prediction for the client."

Fortunately, we do not have to report test scores and their interpretation in a vacuum. We have the opportunity to integrate

the meaning of those scores and observations of the testing session with what clients say about themselves and their known history. Thus the importance of a careful interview including a personal, social and vocational history is indispensable.

A final statement for anyone testing handicapped clients. It is clear their test performance can be hampered by disabilities unrelated to the abilities those tests measure. We must make every reasonable effort to provide handicapped clients with the most valid test possible. The success of their rehabilitation program probably depends on it. It is important that we use a pragmatic philosophy in which prescribed procedures are respected when they clearly do not impair the realistic assessment of performance. However, when necessary, adjustments in testing procedures are made and predictive conclusions are interpreted in light of the impact of any changes on standard norms and on implications for functioning in the real world.

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